*	ROUTING AND TRANSMITTAL SLIP O: (Name, office symbol, room number, building, Agency/Post)			10 Oct 79	
TO				Initials	Date
1.	COL CAPPS			K	BCT 11
2.	COL WELLS			2180	11/10/99
3.	MG THOMPSON	waina wa		Ear	100
<u>4.</u>				ļ	
<u>S.</u>	SUBJ: INSCOM GR	ILL FLAME/SCIENCE	EVA	LUATION	
	Action	File	No	ote and Return	
	Approval	For Clearance	Pe	Per Conversation	
	As Requested	For Correction	Pre	Prepare Reply	
	Circulate	For Your Information	Se	See Me	
	omment Investigate		Signature		
-	Coordination	Justify			

REMARKS FYI, the attached memo to the GF Science Eval Group is my input regarding INSCOM. I expect that all or part of it will appear in the final report.

GRILL FLAME (U) GLOSE HOLD/HAND GARRY

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions.

FROM: (Namo, org. symbol, Agency/Post)

Room No.—Bidg.

Phone No.

Phone No.

OPTIONAL FORM 41 (Rev. 7-76)

Prescribed by 6SA
FPMR (41 CFR) 101-11.206